

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Massachusetts Republican State Congressional Committee

ADDRESS (number and street)

85 Merrimac Street, Suite 400

☐Check if different
than previously
reported. (ACC)

Boston

MA

02114

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00042622

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

07

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brent Andersen

Signature of Treasurer

Electronically Filed by Brent Andersen

Date

08

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		62748.60
(b) Cash on Hand at Beginning of Reporting Period	174975.57	
(c) Total Receipts (from Line 19)	167142.38	1278317.80
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	342117.95	1341066.40
7. Total Disbursements (from Line 31)	244354.74	1243303.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	97763.21	97763.21
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	142625.00	1039500.00
(i) Itemized (use Schedule A)	23554.00	167459.99
(ii) Unitemized	166179.00	1206959.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	50.00
(b) Political Party Committees	0.00	65850.00
(c) Other Political Committees (such as PACs)	0.00	166179.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	166179.00	1272859.99
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	963.38	5457.81
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	167142.38	1278317.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	167142.38	1278317.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	174311.91	924382.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	174311.91	924382.46
22. Transfers to Affiliated/Other Party Committees.....	35000.00	65550.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	35042.83	253370.73
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	35042.83	253370.73
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	244354.74	1243303.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	244354.74	1243303.19

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	166179.00	1272859.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	166179.00	1272859.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	174311.91	924382.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	963.38	5457.81
38. Net Operating Expenditures (subtract Line 37 from Line 36)	173348.53	918924.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Linda Allen Mailing Address 103 Central St. City State Zip Code Byfield MA 01922 FEC ID number of contributing federal political committee. C Name of Employer Security Team Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2006 Transaction ID: 60719.C160277 Amount of Each Receipt this Period 200.00 Receipt
B. Full Name (Last, First, Middle Initial) Peter Aspesi Mailing Address 3 Macneill Drive City State Zip Code Southborough MA 01772-1611 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 07 / 13 / 2006 Transaction ID: 60713.C160109 Amount of Each Receipt this Period 100.00 Receipt
C. Full Name (Last, First, Middle Initial) Barbara Berkowitz Mailing Address PO Box 1386 City State Zip Code Newburyport MA 01950 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2006 Transaction ID: 60719.C160280 Amount of Each Receipt this Period 200.00 Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Cara Blank Mailing Address 116 Shaw Farm Rd. City State Zip Code Canton MA 02021 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6 Transaction ID: 60817.C160543 Amount of Each Receipt this Period 200.00 Receipt
B. Full Name (Last, First, Middle Initial) Jean Blomfield Mailing Address 11 Meadow Rd. City State Zip Code East Longmeadow MA 01028 FEC ID number of contributing federal political committee. C Name of Employer Monarch Life Ins. Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 6 Transaction ID: 60713.C160086 Amount of Each Receipt this Period 100.00 Receipt
C. Full Name (Last, First, Middle Initial) Aletta Bond Mailing Address 11 Villa Rd City State Zip Code Hamilton MA 01982 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 5 / 2 0 0 6 Transaction ID: 60817.C160414 Amount of Each Receipt this Period 200.00 Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Barbara Booth		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 5 / 2 0 0 6	
Mailing Address 7 Paul Revere Rd.		Transaction ID: 60713.C159763	
City Worcester	State MA	Zip Code 01609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation At home		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Receipt

B. Full Name (Last, First, Middle Initial) Brian Brooks		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 6	
Mailing Address 19 Harvard Street		Transaction ID: 60817.C160558	
City Boston	State MA	Zip Code 02129-3715	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Receipt

C. Full Name (Last, First, Middle Initial) Kenneth Brown		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6	
Mailing Address 99 Sanborn Lane		Transaction ID: 60719.C160259	
City Reading	State MA	Zip Code 01867	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Safe Hydrogen LLC	Occupation Business owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Receipt

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Kenneth Brown		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 6
Mailing Address 99 Sanborn Lane		Transaction ID: 60817.C160572
City Reading	State MA	Zip Code 01867
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Safe Hydrogen LLC	Occupation Business owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Receipt

B. Full Name (Last, First, Middle Initial) Brian Cadieux		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address PO Box 1243		Transaction ID: 60817.C160547
City Portsmouth	State NH	Zip Code 03802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Alliance Companies	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

C. Full Name (Last, First, Middle Initial) Henry Ciborowski		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 16 Beechmont Street		Transaction ID: 60713.C159781
City Worcester	State MA	Zip Code 01609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Ciborowski Insurance Agency	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Barbara Claypoole
Mailing Address 3 Pinecrest Road

City State Zip Code
Hingham MA 02043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 5 / 2 0 0 6

Transaction ID: 60817.C160469

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frederic Clifford
Mailing Address PO Box 1884

City State Zip Code
Duxbury MA 02331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159999

Amount of Each Receipt this Period

300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gould Coleman
Mailing Address 81 Bickford Hill Rd

City State Zip Code
Gardner MA 01440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159988

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Gould Coleman

Mailing Address 81 Bickford Hill Rd

City State Zip Code
Gardner MA 01440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 11 / 2006

Transaction ID: 60713.C160000

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Christopher Collins

Mailing Address 72 Harbor Street

City State Zip Code
Manchester MA 01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Collins & Company, LLC

Occupation
real estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

07 / 12 / 2006

Transaction ID: 60713.C160003

Amount of Each Receipt this Period

10000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Christopher Collins

Mailing Address 72 Harbor Street

City State Zip Code
Manchester MA 01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Collins & Company, LLC

Occupation
real estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

07 / 31 / 2006

Transaction ID: 60817.C160523

Amount of Each Receipt this Period

-5000.00

Memo

[MEMO ITEM]

c. collins, transfer of
excess funds from fed to
non fed

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Herbert Collins		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 15 Clarendon Street		Transaction ID: 60713.C160059
City Gloucester	State MA	Zip Code 01930-4170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Collins and Nickas Co.	Occupation Chairman of Brd.	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B. Full Name (Last, First, Middle Initial) Herbert Collins		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 15 Clarendon Street		Transaction ID: 60817.C160525
City Gloucester	State MA	Zip Code 01930-4170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -5000.00
Name of Employer Collins and Nickas Co.	Occupation Chairman of Brd.	Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	[MEMO ITEM] h.collins, transfer excess contrib from fed to non fed

C. Full Name (Last, First, Middle Initial) Nathan Couch		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 5 High Rock Rd.		Transaction ID: 60719.C160228
City Dover	State MA	Zip Code 02030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)

10075.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Nathaniel Dalton		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 136 Galloupes Point		Transaction ID: 60817.C160607
City Swampscott	State MA	Zip Code 01907
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -5000.00
Name of Employer Affiliated Managers Group	Occupation EVP	Memo [MEMO ITEM] dalton, transfer excess contrib from fed to non fed
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B. Full Name (Last, First, Middle Initial) Mario DiCarlo		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 56 Beecher Place		Transaction ID: 60713.C159986
City Newton	State MA	Zip Code 02459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Self Employed	Occupation Contractor	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C. Full Name (Last, First, Middle Initial) Albert DiGregorio		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 6 / 2 0 0 6
Mailing Address 8 Jacobs Road		Transaction ID: 60713.C159838
City Southbridge	State MA	Zip Code 01550
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer United Lens Co.	Occupation Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Jody Dow

Mailing Address 71 Leicester Street

City State Zip Code
 Brookline MA 02445

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr. Elias Dow

Occupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159987

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

B. Christopher Egan

Mailing Address Carruth Capital
 116 Flanders Road

City State Zip Code
 Westborough MA 01581

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carruth Capital

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159990

Amount of Each Receipt this Period

-5000.00

Memo

[MEMO ITEM]

transfer excess contribut-
ion from june to non fede-
ral

Full Name (Last, First, Middle Initial)

C. Paul Fireman

Mailing Address 120 Wells Avenue

City State Zip Code
 Newton MA 02459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Reebok

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: 60713.C159743

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Jonathan Fletcher

Mailing Address 664 56th street

City State Zip Code
 Des Moines IA 50312

FEC ID number of contributing federal political committee.

C

Name of Employer
Bankers Trust Co.Occupation
Trust Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: 60713.C159746

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

B. Robert Fopp

Mailing Address 41 Newhouse Street

City State Zip Code
 Springfield MA 01118

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159911

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

C. Robert Fopp

Mailing Address 41 Newhouse Street

City State Zip Code
 Springfield MA 01118

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60713.C160007

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Linda Fosburg Mailing Address 1106 Massachusetts Avenue City Lexington State MA Zip Code 02420 FEC ID number of contributing federal political committee. C Name of Employer Barton Fosburg & Associates Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 07 / 13 / 2006 Transaction ID: 60719.C160140 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Arnold Garrison Mailing Address 181 Pine Ridge Rd. City Newton State MA Zip Code 02468 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 07 / 05 / 2006 Transaction ID: 60713.C159764 Amount of Each Receipt this Period 100.00 Receipt
C. Full Name (Last, First, Middle Initial) Dola Hamilton Stenberg Mailing Address 5 Louisburg Square City Boston State MA Zip Code 02108-1202 FEC ID number of contributing federal political committee. C Name of Employer At Home Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 07 / 05 / 2006 Transaction ID: 60713.C159741 Amount of Each Receipt this Period 5000.00 Receipt

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Dola Hamilton Stenberg Mailing Address 5 Louisburg Square City Boston State MA Zip Code 02108-1202 FEC ID number of contributing federal political committee. C Name of Employer At Home Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 6000.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2006 Transaction ID: 60720.C160327 Amount of Each Receipt this Period 1000.00 Receipt
B. Full Name (Last, First, Middle Initial) Richard Harris Mailing Address 22 Oakland Ave. City Quincy State MA Zip Code 02170 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 07 / 25 / 2006 Transaction ID: 60817.C160471 Amount of Each Receipt this Period 100.00 Receipt
C. Full Name (Last, First, Middle Initial) R. Christian Haufler Mailing Address PO Box 92, 272 Damon Pt. Rd City Marshfield State MA Zip Code 02051 FEC ID number of contributing federal political committee. C Name of Employer Haufler Associates Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 Transaction ID: 60713.C160062 Amount of Each Receipt this Period 5000.00 Receipt

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Eric Hersum		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 99 North Avenue		Transaction ID: 60719.C160157
City Weston	State MA	Zip Code 02493
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 200.00	

Receipt

B. Full Name (Last, First, Middle Initial) Leo Kahn		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 180 Kent Rd.		Transaction ID: 60713.C159744
City Newton	State MA	Zip Code 02468
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested United Properties Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested CEO Aggregate Year-to-Date ▼ 1000.00	

Receipt

C. Full Name (Last, First, Middle Initial) William Ansley Knowlton		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 62 Beacon Street		Transaction ID: 60713.C160006
City Boston	State MA	Zip Code 02108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested Ropes & Gray Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Attorney Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Robert Lawrence
Mailing Address 24 Jackson Pond Road

City State Zip Code
Dedham MA 02026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2006

Transaction ID: 60713.C159951

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Richard Lawton
Mailing Address 157 Belmont Street

City State Zip Code
Brockton MA 02301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2006

Transaction ID: 60817.C160438

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gregg Lisciotti
Mailing Address 24 Walden Court

City State Zip Code
Leominster MA 01453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lisciotti Development Corp.

Occupation
Real Estate Develop.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2006

Transaction ID: 60713.C159992

Amount of Each Receipt this Period

-5000.00

Memo

[MEMO ITEM]

transfer excess funds from
june to non federal

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Antonio Lorusso

Mailing Address PO Box 230

City

Walpole

State

MA

Zip Code

02081

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.M. Lorusso and Sons, In-
c.Occupation
Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 6

Transaction ID: 60817.C160437

Amount of Each Receipt this Period

4000.00

Receipt

Full Name (Last, First, Middle Initial)

B. Lisa Matthews

Mailing Address 621 Country Way

City

Scituate

State

MA

Zip Code

02066

FEC ID number of contributing
federal political committee.

C

Name of Employer
North American Management
CorpOccupation
Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 5 / 2 0 0 6

Transaction ID: 60713.C159747

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

C. John McCarthy

Mailing Address 1 Pierce Rd.

City

Peabody

State

MA

Zip Code

01960

FEC ID number of contributing
federal political committee.

C

Name of Employer
B.k. McCarthy Insurance
AgencyOccupation
insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60713.C160030

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) J. stuart Moore Mailing Address 7 Gales Point Road City Manchester State MA Zip Code 01944 FEC ID number of contributing federal political committee. C Name of Employer Sapient Corporation Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 07 / 28 / 2006 Transaction ID: 60817.C160573 Amount of Each Receipt this Period 2000.00 Receipt
B. Full Name (Last, First, Middle Initial) Sandra Moose Mailing Address 53 Beverly Rd. City Newton State MA Zip Code 02467 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2006 Transaction ID: 60719.C160274 Amount of Each Receipt this Period 250.00 Receipt
C. Full Name (Last, First, Middle Initial) Ann Murphy Mailing Address 65 Helen Street City Waltham State MA Zip Code 02452 FEC ID number of contributing federal political committee. C Name of Employer GPC/ONEILL & Assoc. Occupation Vice President, PR Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00		Date of Receipt MM / DD / YYYY 07 / 13 / 2006 Transaction ID: 60719.C160144 Amount of Each Receipt this Period 250.00 Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Ruth Nicholas

Mailing Address 58 Chestnut St

City State Zip Code
 Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 0 6

Transaction ID: 60817.C160606

Amount of Each Receipt this Period

10000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Themis Papageorge

Mailing Address 54 Country Dr

City State Zip Code
 Weston MA 02493

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digital Equipment Corpora-
tion

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 60720.C160347

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Guido Perera

Mailing Address 121 Old Concord Rd.

City State Zip Code
 Lincoln MA 01773

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: 60713.C159786

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Lovett Peters		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 81 Old Orchard Rd.		Transaction ID: 60719.C160270
City Newton	State MA	Zip Code 02467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Pioneer Institute	Occupation Chairman	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

B. Full Name (Last, First, Middle Initial) Marion Phillips		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 279 North St.		Transaction ID: 60719.C160272
City Medfield	State MA	Zip Code 02052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C. Full Name (Last, First, Middle Initial) Kathy Putnam		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address Four Smiths Point Road		Transaction ID: 60817.C160522
City Manchester	State MA	Zip Code 01944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)

7100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
George Putnam, III
Mailing Address Four Smiths Point Road

City State Zip Code
Manchester MA 01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60817.C160521

Amount of Each Receipt this Period

5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Roberts
Mailing Address 106 Edmunds Road

City State Zip Code
Wellesley MA 02481

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summit Partners

Occupation
Venture Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 6

Transaction ID: 60713.C159994

Amount of Each Receipt this Period

-5000.00

Memo

[MEMO ITEM]

transfer of funds from fe-
deral acct to state

C. Full Name (Last, First, Middle Initial)
Grant Rodkey
Mailing Address 11 Beatrice Circle

City State Zip Code
Belmont MA 02478

FEC ID number of contributing
federal political committee.

C

Name of Employer
VA Boston Healthcare Syst-
em

Occupation
Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 6

Transaction ID: 60713.C159869

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Robert Sepersky

Mailing Address 65 Southworth St.

City State Zip Code
 Lakeville MA 02347

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60713.C160065

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Joseph Shamon

Mailing Address 38 Orchard St.

City State Zip Code
 Boston MA 02130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60719.C160154

Amount of Each Receipt this Period

150.00

Receipt

C. Full Name (Last, First, Middle Initial)

Daniel Shea

Mailing Address 23 Tubwreck Drive

City State Zip Code
 Medfield MA 02052

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMG

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 0 3 / 2 0 0 6

Transaction ID: 60713.C159740

Amount of Each Receipt this Period

15000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

15650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Daniel Shea

Mailing Address 23 Tubwreck Drive

City State Zip Code
 Medfield MA 02052

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMG

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 8 / 2 0 0 6

Transaction ID: 60719.C160291

Amount of Each Receipt this Period

-5000.00

Memo

[MEMO ITEM]

transfer of excess funds
from federal act to non
federal act

B. Full Name (Last, First, Middle Initial)

Warren Sheinkopf

Mailing Address 140 Princeton Road

City State Zip Code
 Chestnut Hill MA 02467

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60817.C160520

Amount of Each Receipt this Period

15000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Ronald Skates

Mailing Address 4 Boardman Avenue

City State Zip Code
 Manchester MA 01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60713.C160002

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Campbell Steward

Mailing Address 65 Asbury St.

City State Zip Code
 Topsfield MA 01983

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kona Corp.

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 60720.C160339

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

George Tarvezian

Mailing Address P.O. Box 496

City State Zip Code
 Belmont MA 02478-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Tarvezian Group

Occupation
investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60719.C160146

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

David Taylor

Mailing Address 141 Kendall Hill Rd

City State Zip Code
 Sterling MA 01564

FEC ID number of contributing
federal political committee.

C

Name of Employer
Adams & Blinn

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60713.C160088

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Patricia Tucker

Mailing Address 4 Sturbridge Rd.

City State Zip Code
 Wellesley MA 02481

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
At home

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60713.C160121

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Richard Valentine

Mailing Address 135 Wood Rd.

City State Zip Code
 Braintree MA 02184

FEC ID number of contributing
federal political committee.

C

Name of Employer
F-1 Boston

Occupation
Business owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60719.C160158

Amount of Each Receipt this Period

5000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Donald Voghel

Mailing Address 497 Old Road To 9 Acre Corner

City State Zip Code
 Concord MA 01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIG Corporation

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 2 8 / 2 0 0 6

Transaction ID: 60817.C160574

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

7600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Adam Donovan Waitkunas

Mailing Address P.O. Box 146

City State Zip Code
 Carlisle MA 01741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rasky/Baerlein Group

Occupation
Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 3 / 2 0 0 6

Transaction ID: 60719.C160132

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. D. Bradford Wetherell

Mailing Address 47 Fresh Pond Ln.

City State Zip Code
 Cambridge MA 02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 8 / 2 0 0 6

Transaction ID: 60719.C160220

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

C. Constance V R White

Mailing Address 68 Beacon St.

City State Zip Code
 Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 5 / 2 0 0 6

Transaction ID: 60817.C160377

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Robert White		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 23 Chadwick Road		Transaction ID: 60719.C160288
City Weston	State MA	Zip Code 02493
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Bain Capital	Occupation Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

B. Full Name (Last, First, Middle Initial) Tona White		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 23 Chadwick Road		Transaction ID: 60719.C160286
City Weston	State MA	Zip Code 02493
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Homemaker	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

C. Full Name (Last, First, Middle Initial) Susan Barker Winslow		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 17 Fredrickson Road		Transaction ID: 60713.C160123
City Norfolk	State MA	Zip Code 02056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

20250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Donald Wong

Mailing Address 53 Juniper Drive

City

Saugus

State

MA

Zip Code

01906-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kowloon RestaurantOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 6

Transaction ID: 60719.C160136

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

142625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 74

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Matthew Gauvin

Mailing Address 42 McKay Avenue

DO NOT MAIL- not donor

City

Fitchburg

State

MA

Zip Code

01420-

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassGOP

Occupation

Field Coordinator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2681.10

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 6

Transaction ID: 60817.C160609

Amount of Each Receipt this Period

946.00

Offsets to Operating Expe-
nditu

Note: cobra payment from
former employee

SUBTOTAL of Receipts This Page (optional)

946.00

TOTAL This Period (last page this line number only)

946.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. AlphaGraphics AlphaGraphics

Mailing Address 74 Canal Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
PRINTING-GENERAL NON FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60719.E8789

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3263.06

PRINTING-GENERAL NON FEA

Full Name (Last, First, Middle Initial)

B. Affiliated Managers AMG

Mailing Address 600 Hale St.

City
Beverly

State
MA

Zip Code
01965-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60720.E8821

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1155.00

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

C. Rhonda Avola

Mailing Address 306 Main St. Unit 10

City
Melrose

State
MA

Zip Code
02176-

Purpose of Disbursement
ADMINISTRATION SERVICE NON FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60720.E8831

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1980.00

ADMINISTRATION SERVICE NON
FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional)

6398.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8774

Date of Disbursement

/ /

Amount of Each Disbursement this Period

523.60

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement
B.BARVER S REIMBURSEMENT FOR PERSONAL C

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8775

Date of Disbursement

/ /

Amount of Each Disbursement this Period

523.60

[MEMO ITEM]

MEMO: B.BARVER S REIMBURSEMENT FOR PERSONAL CAR USE MILEAGE

Full Name (Last, First, Middle Initial)

C. Peter Blute

Mailing Address 657 South St.

City
Shrewsbury

State
MA

Zip Code
01545-

Purpose of Disbursement
POLITICAL CONSULTING ADVISOR ON POLITICAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8829

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

POLITICAL CONSULTING ADVISOR ON POLITICAL ISSUES.

SUBTOTAL of Disbursements This Page (optional)

4523.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. B&S Bodoff & Slavitt

Mailing Address 225 Friend Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
LEGAL COUNSEL/ADVICE NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8790

Date of Disbursement

/ /

Amount of Each Disbursement this Period

101.34

LEGAL COUNSEL/ADVICE NON-FEA

Full Name (Last, First, Middle Initial)

B. Maeve Bowman

Mailing Address 404 Commercial St. Apt 2

City
Boston

State
MA

Zip Code
02109-

Purpose of Disbursement
ADMINISTRATION SERVICE NON-FEA NO FEDER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8826

Date of Disbursement

/ /

Amount of Each Disbursement this Period

363.00

ADMINISTRATION SERVICE NO-N-FEA NO FEDERAL CANDIDATE

Full Name (Last, First, Middle Initial)

C. Repro-graphics Cambridge

Mailing Address 21 McGrath Highway

City
Somerville

State
MA

Zip Code
02143-

Purpose of Disbursement
GENERAL PRINTING NON FEA NO FED CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8793

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2414.94

GENERAL PRINTING NON FEA NO FED CANDIDATE

SUBTOTAL of Disbursements This Page (optional)

2879.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Cambridge Offset Printing

Mailing Address 56 Creighton Street

City Cambridge State MA Zip Code 02140-

Purpose of Disbursement
GENERAL PRINTING NON FEA NO FED CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8792

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

448.25

GENERAL PRINTING NON FEA
NO FED CANDIDATE

Full Name (Last, First, Middle Initial)

B. Cambridge Offset Printing

Mailing Address 56 Creighton Street

City Cambridge State MA Zip Code 02140-

Purpose of Disbursement
GENERAL PRINTING NON FEA NO FED CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8822

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

420.00

GENERAL PRINTING NON FEA
NO FED CANDIDATE

Full Name (Last, First, Middle Initial)

C. Cambridge Offset Printing

Mailing Address 56 Creighton Street

City Cambridge State MA Zip Code 02140-

Purpose of Disbursement
GENERAL PRINTING NON FEA NO FED CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8867

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

472.50

GENERAL PRINTING NON FEA
NO FED CANDIDATE

SUBTOTAL of Disbursements This Page (optional)

1340.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Coss Castle Self-Storage

Mailing Address 39 Old Colony Ave.

City
Boston

State
MA

Zip Code
02127-

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8898

Date of Disbursement

/ /

Amount of Each Disbursement this Period

289.12

STORAGE

B. Conference Call Conference Call.

Mailing Address 1445 MacArthur Dr.
Suite 214

City
Carrollton

State
TX

Zip Code
75007-

Purpose of Disbursement
CONFERENCE CALL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8794

Date of Disbursement

/ /

Amount of Each Disbursement this Period

51.38

CONFERENCE CALL

C. CPMA, Inc.

Mailing Address 84 Prescott St.
Suite 21

City
Cambridge

State
MA

Zip Code
02138-

Purpose of Disbursement
POLITICAL CONSULTING NON-FEA POLITICAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8795

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

POLITICAL CONSULTING NO-
N-FEA POLITICAL CONSULTING
ADVICE

SUBTOTAL of Disbursements This Page (optional)

5340.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paul Craney

Mailing Address 177 Cambridge Ave

City Fair Haven State NJ Zip Code 07704-

Purpose of Disbursement
REIMBURSEMENT FOR FOOD AND MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8781

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

128.00

REIMBURSEMENT FOR FOOD AND
MILEAGE

Full Name (Last, First, Middle Initial)

B. Paul Craney

Mailing Address 177 Cambridge Ave

City Fair Haven State NJ Zip Code 07704-

Purpose of Disbursement
REIMBURSEMENT FOR PERSONAL CAR USE MILEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8880

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

7.20

REIMBURSEMENT FOR PERSONAL
CAR USE MILEAGE

Full Name (Last, First, Middle Initial)

C. Paul Craney

Mailing Address 177 Cambridge Ave

City Fair Haven State NJ Zip Code 07704-

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND TOLLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8903

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

152.36

REIMBURSEMENT FOR MILEAGE
AND TOLLS

SUBTOTAL of Disbursements This Page (optional)

287.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Crown Crown Plaza Hotel

Mailing Address 2 Forbes Rd.

City Woburn State MA Zip Code 01801-

Purpose of Disbursement
STATE COMMITTEE MEETING NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8788

Date of Disbursement

07 / 07 / 2006

Amount of Each Disbursement this Period

1456.01

STATE COMMITTEE MEETING
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

B. Hui Jojo Deng

Mailing Address 117 Beaconsfield Road

City Brookline State MA Zip Code 02445-

Purpose of Disbursement
ACCOUNTING SERVICE- GENERAL ACCOUNTING N

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8776

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

874.50

ACCOUNTING SERVICE- GENER-
AL ACCOUNTING NON-FEA

Full Name (Last, First, Middle Initial)

C. DirecTV DirecTV

Mailing Address PO Box 60036

City Los Angeles State CA Zip Code 90060-0036

Purpose of Disbursement
CABLE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8823

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

144.90

CABLE SERVICE

SUBTOTAL of Disbursements This Page (optional)

2475.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

501.60

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. US AIRWAYS US AIRWAYS

Mailing Address Logan Airport

City
Boston

State
MA

Zip Code
02128-

Purpose of Disbursement
B.DODGE REIMBURSEMENT FOR AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

471.60

[MEMO ITEM]

MEMO: B.DODGE REIMBURSEMENT FOR AIRFARE

Full Name (Last, First, Middle Initial)

C. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8909

Date of Disbursement

/ /

Amount of Each Disbursement this Period

804.35

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1305.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Budget Budget Car Rental

Mailing Address web address only- www.budget.com

City Boston State MA Zip Code 02114-

Purpose of Disbursement
B.DODGE REIMBURSEMENT FOR MOVING TRUCK R

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8910

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

611.86

[MEMO ITEM]

MEMO: B.DODGE REIMBURSEMENT FOR MOVING TRUCK RENTAL

Full Name (Last, First, Middle Initial)

B. ENlisson ENlisson

Mailing Address 6 Depot Street

City Westford State MA Zip Code 01886-

Purpose of Disbursement
WEB HOSTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8796

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

970.50

WEB HOSTING

Full Name (Last, First, Middle Initial)

C. Federal Express (Fed Ex)

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250-

Purpose of Disbursement
EXPRESS MAIL- NON FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8797

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

176.83

EXPRESS MAIL- NON FEA

SUBTOTAL of Disbursements This Page (optional)

1147.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
EXPRESS MAIL NON FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8868

Date of Disbursement

/ /

Amount of Each Disbursement this Period

136.47

EXPRESS MAIL NON FEA

B. Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
EXPRESS MAIL NON FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

84.25

EXPRESS MAIL NON FEA

C. Fleet Bank

Mailing Address 100 Federal Street

City
Boston

State
MA

Zip Code
02110-

Purpose of Disbursement
BANK SERVICE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8931

Date of Disbursement

/ /

Amount of Each Disbursement this Period

207.00

BANK SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional)

427.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Guardian Guardian

Mailing Address Boston Group Office
1 Liberty Square

City Boston State MA Zip Code 02109-

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8845

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

426.87

INSURANCE

Full Name (Last, First, Middle Initial)

B. HPH Inc. Harvard Pilgram Heal

Mailing Address 1200 Crown Colony Dr.

City Quincy State MA Zip Code 02169-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8900

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

6165.28

HEALTH INSURANCE

Full Name (Last, First, Middle Initial)

C. Lyndsay Jones

Mailing Address 95 West Squantum St. #707

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL AND FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8777

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

60.16

REIMBURSEMENT FOR TRAVEL
AND FOOD

SUBTOTAL of Disbursements This Page (optional)

6652.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL AND FOOD AND M

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

297.29

REIMBURSEMENT FOR TRAVEL
AND FOOD AND MILEAGE

Full Name (Last, First, Middle Initial)

B. Lexis-Nexis

Mailing Address PO Box 7247-7090

City
Philadelphia

State
PA

Zip Code
19170-

Purpose of Disbursement
RESEARCH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8825

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1050.00

RESEARCH

Full Name (Last, First, Middle Initial)

C. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City
Boston

State
MA

Zip Code
02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8929

Date of Disbursement

/ /

Amount of Each Disbursement this Period

694.30

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

2041.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Konica Minolta Business Systems

Mailing Address P.O. Box 7247-0322

City
Philadelphia

State
PA

Zip Code
19170-0322

Purpose of Disbursement
COPIER RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8824

Date of Disbursement

/ /

Amount of Each Disbursement this Period

965.60

COPIER RENTAL

Full Name (Last, First, Middle Initial)

B. N.M. Inc. National Media, Inc.

Mailing Address 815 Slater Lane

City
Alexandria

State
VA

Zip Code
22314-

Purpose of Disbursement
PRODUCTION OF VIDEO NON ADVERTISING FO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8779

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30000.00

PRODUCTION OF VIDEO NON
ADVERTISING FOR INTERNAL
USE ONLY

Full Name (Last, First, Middle Initial)

C. N.M. Inc. National Media, Inc.

Mailing Address 815 Slater Lane

City
Alexandria

State
VA

Zip Code
22314-

Purpose of Disbursement
PRODUCTION OF VIDEO NON ADVERTISING FO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30000.00

PRODUCTION OF VIDEO NON
ADVERTISING FOR INTERNAL
USE ONLY

SUBTOTAL of Disbursements This Page (optional)

60965.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Communication Inc OBrien

Mailing Address PO Box 659

City
Wrentham

State
MA

Zip Code
02093-

Purpose of Disbursement
PHONE SYSTEM MAINTAINENCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8828

Date of Disbursement

/ /

Amount of Each Disbursement this Period

147.50

PHONE SYSTEM MAINTAINENCE

Full Name (Last, First, Middle Initial)

B. Communication Inc OBrien

Mailing Address PO Box 659

City
Wrentham

State
MA

Zip Code
02093-

Purpose of Disbursement
PHONE SYSTEM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8902

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.50

PHONE SYSTEM

Full Name (Last, First, Middle Initial)

C. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-401K

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8759

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1480.76

PAYROLL-401K

SUBTOTAL of Disbursements This Page (optional)

1735.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8758

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2006

Amount of Each Disbursement this Period

7927.75

PAYROLL-TAXES

Full Name (Last, First, Middle Initial)

B. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-401 K

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8861

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2006

Amount of Each Disbursement this Period

1480.76

PAYROLL-401 K

Full Name (Last, First, Middle Initial)

C. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8860

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2006

Amount of Each Disbursement this Period

8779.44

PAYROLL-TAXES

SUBTOTAL of Disbursements This Page (optional)

18187.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8930

Date of Disbursement

/ /

Amount of Each Disbursement this Period

191.51

PAYROLL-TAXES

B. Poland Spring Poland Spring

Mailing Address Processing Center
PO Box 52271

City
Phoenix

State
AZ

Zip Code
85072-

Purpose of Disbursement
BOTTLE WATER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

81.64

BOTTLE WATER

C. Boston Postmaster

Mailing Address JW MCCORMACK STATION
New Chardon Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
POSTAGE-GENERAL USE NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8786

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1950.00

POSTAGE-GENERAL USE NON-FEA

SUBTOTAL of Disbursements This Page (optional)

2223.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Boston Postmaster

Mailing Address JW MCCORMACK STATION
New Chardon Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
POSTAGE-GENERAL USE NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8872

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

162.00

POSTAGE-GENERAL USE NON-F-EA

Full Name (Last, First, Middle Initial)

B. Boston Postmaster

Mailing Address JW MCCORMACK STATION
New Chardon Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
POSTAGE-GENERAL USE NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8904

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

1950.00

POSTAGE-GENERAL USE NON-F-EA

Full Name (Last, First, Middle Initial)

C. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City Quincy State MA Zip Code 02169-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL PARKING FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8877

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

122.92

REIMBURSEMENT FOR TRAVEL
PARKING FOOD

SUBTOTAL of Disbursements This Page (optional)

2234.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City
Waltham

State
MA

Zip Code
02453-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8836

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

1214.25

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Lyceum Bar & Grill

Mailing Address 43 Church St.

City
Salem

State
MA

Zip Code
01970-

Purpose of Disbursement
S. ROCHE REIMBURSEMENT FOR FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8839

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

271.86

[MEMO ITEM]

MEMO: S. ROCHE REIMBURSEMENT FOR FOOD

Full Name (Last, First, Middle Initial)

C. Laz Parking Ltd.

Mailing Address 101 Merrimac Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
S. ROCHE REIMBURSEMENT FOR PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8837

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

375.00

[MEMO ITEM]

MEMO: S. ROCHE REIMBURSEMENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)

1214.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Sprint/Nextel

Mailing Address PO Box 17990

City
Denver

State
CO

Zip Code
80217-

Purpose of Disbursement
S. ROCHE REIMBURSEMENT FOR CELL PHONE US

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8838

Date of Disbursement

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 6

Amount of Each Disbursement this Period

137.77

[MEMO ITEM]

MEMO: S. ROCHE REIMBURSEM-
ENT FOR CELL PHONE USES

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8885

Date of Disbursement

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 6

Amount of Each Disbursement this Period

322.42

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

Full Name (Last, First, Middle Initial)

C. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8893

Date of Disbursement

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 6

Amount of Each Disbursement this Period

255.00

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

577.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. New Beverly Auto Clinic

Mailing Address 126 Park St.

City
Beverly

State
MA

Zip Code
01915-

Purpose of Disbursement
M. ROWE REIMBURSEMENT FOR AUTO TOWING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8894

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

255.00

[MEMO ITEM]

MEMO: M. ROWE REIMBURSEMENT FOR AUTO TOWING

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8890

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

993.56

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Sam Lagrassas

Mailing Address 44 Province St.

City
Boston

State
MA

Zip Code
02108-

Purpose of Disbursement
M. ROWE REIMBURSEMENT FOR FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8889

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

334.79

[MEMO ITEM]

MEMO: M. ROWE REIMBURSEMENT FOR FOOD

SUBTOTAL of Disbursements This Page (optional)

993.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Summer Shack

Mailing Address 10 Scotia St.

City Boston State MA Zip Code 02115-

Purpose of Disbursement
M. ROWE REIMBURSEMENT FOR FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8891

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

364.50

[MEMO ITEM]

MEMO: M. ROWE REIMBURSEMENT FOR FOOD

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City Wayland State MA Zip Code 01778-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8881

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

878.01

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Cobblestones of Lowell

Mailing Address 91 Dutton St.

City Lowell State MA Zip Code 01852-

Purpose of Disbursement
M. ROWE REIMBURSEMENT FOR DINNER MEETING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8882

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

878.01

[MEMO ITEM]

MEMO: M. ROWE REIMBURSEMENT FOR DINNER MEETING

SUBTOTAL of Disbursements This Page (optional)

878.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 / 74

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8888

Date of Disbursement

/ /

Amount of Each Disbursement this Period

515.95

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Elephant Calendar

Mailing Address 70 BroadWay

City
Westford

State
MA

Zip Code
01886-

Purpose of Disbursement
M.ROWE REIMBURSEMENT FOR SIGN/ DISPLAYS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8892

Date of Disbursement

/ /

Amount of Each Disbursement this Period

266.87

[MEMO ITEM]

MEMO: M.ROWE REIMBURSEMENT
FOR SIGN/ DISPLAYS FOR GE-
NERAL OFFICE USE

Full Name (Last, First, Middle Initial)

C. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8883

Date of Disbursement

/ /

Amount of Each Disbursement this Period

480.19

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

996.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Verizon Verizon Wireless

Mailing Address PO Box 5029

City
Wallingford

State
CT

Zip Code
06492-

Purpose of Disbursement
M. ROWE REIMBURSEMENT FOR CELLPHONE CALL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8884

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

480.19

[MEMO ITEM]

MEMO: M. ROWE REIMBURSEMENT
FOR CELLPHONE CALL

Full Name (Last, First, Middle Initial)

B. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City
Boston

State
MA

Zip Code
02132-

Purpose of Disbursement
REIMBURSEMENT FOR TRANSPORTATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8830

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

124.85

REIMBURSEMENT FOR TRANSPORTATION

Full Name (Last, First, Middle Initial)

C. SCM Associates

Mailing Address Steve Meyers
PO Box 720

City
Jaffrey

State
NH

Zip Code
03452-

Purpose of Disbursement
DIRECT MAILING PROGRAM NON FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8801

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

10796.29

DIRECT MAILING PROGRAM NON
FEA NO FEDERAL CANDIDATE

SUBTOTAL of Disbursements This Page (optional)

10921.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. SCM Associates

Mailing Address Steve Meyers
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement
DIRECT MAILING AND TELEMARKETING NON FE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8876

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

9989.83

DIRECT MAILING AND TELEMAR-
KETING NON FEA NO FEDERAL
CANDIDATE

Full Name (Last, First, Middle Initial)

B. SCM Associates

Mailing Address Steve Meyers
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement
DIRECT MAIL AND TELEMARKETING NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8908

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

9232.96

DIRECT MAIL AND TELEMARKE-
TING NON-FEA NO FEDERAL
CANDIDATE

Full Name (Last, First, Middle Initial)

C. Staples, Inc.

Mailing Address Staples Credit Plan
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8785

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

209.80

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

19432.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Staples, Inc.

Mailing Address Staples Credit Plan
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8906

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

1704.85

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. T-Mobile T-Mobile

Mailing Address PO Box 790047

City Saint Louis State MO Zip Code 63179-

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8873

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

1964.36

PHONE SERVICE

Full Name (Last, First, Middle Initial)

C. The Amaral Group

Mailing Address 201 Great Rd. Suite #2

City Acton State MA Zip Code 01720-

Purpose of Disbursement
NETWORK SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8832

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

960.00

NETWORK SUPPORT

SUBTOTAL of Disbursements This Page (optional)

4629.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. USground USground

Mailing Address PO Box 130349

City
Boston

State
MA

Zip Code
02113-

Purpose of Disbursement
COURIER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8800

Date of Disbursement

/ /

Amount of Each Disbursement this Period

82.67

COURIER

Full Name (Last, First, Middle Initial)

B. USground USground

Mailing Address PO Box 130349

City
Boston

State
MA

Zip Code
02113-

Purpose of Disbursement
COURIER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8875

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.80

COURIER

Full Name (Last, First, Middle Initial)

C. USground USground

Mailing Address PO Box 130349

City
Boston

State
MA

Zip Code
02113-

Purpose of Disbursement
COURIER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8907

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.31

COURIER

SUBTOTAL of Disbursements This Page (optional)

164.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address P.O. Box 1

City
Worcester

State
MA

Zip Code
01654-

Purpose of Disbursement
PHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8834

Date of Disbursement

/ /

Amount of Each Disbursement this Period

719.16

PHONE

Full Name (Last, First, Middle Initial)

B. Verizon- Verizon Internet Ser

Mailing Address PO Box 101096

City
Atlanta

State
GA

Zip Code
30392-

Purpose of Disbursement
INTERNET SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8835

Date of Disbursement

/ /

Amount of Each Disbursement this Period

767.62

INTERNET SERVICES

Full Name (Last, First, Middle Initial)

C. Mary Rose Watson

Mailing Address 463 Park Dr. Apt 16

City
Boston

State
MA

Zip Code
02115-

Purpose of Disbursement
REIMBURSEMENT OF TRANSPORTATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.00

REIMBURSEMENT OF TRANSPOR-
TATION

SUBTOTAL of Disbursements This Page (optional)

1530.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mary Rose Watson

Mailing Address 463 Park Dr. Apt 16

City
Boston

State
MA

Zip Code
02115-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.00

REIMBURSEMENT FOR TRAVEL

Full Name (Last, First, Middle Initial)

B. Westin Copley Plaza

Mailing Address 10 Huntington Ave.

City
Boston

State
MA

Zip Code
02116-

Purpose of Disbursement
EVENT NON-FEA CATERING GENERAL PARTY EV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8874

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2632.58

EVENT NON-FEA CATERING
GENERAL PARTY EVENT NO FE-
D. CANDIDATE

Full Name (Last, First, Middle Initial)

C. Westin Copley Place

Mailing Address 10 Huntington Ave.

City
Boston

State
MA

Zip Code
02116-

Purpose of Disbursement
EVENT CATERING- NON-FEA GENERAL PARTY EV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8799

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4432.25

EVENT CATERING- NON-FEA
GENERAL PARTY EVENT/RECEP-
TION

SUBTOTAL of Disbursements This Page (optional)

7108.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
REIMBURSEMENT FOR FOOD AND MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8782

Date of Disbursement

/ /

Amount of Each Disbursement this Period

343.36

REIMBURSEMENT FOR FOOD AND
MILEAGE

Full Name (Last, First, Middle Initial)

B. Matthew Wylie

Mailing Address 169 Monsignor OBrien Highway
#705

City
Cambridge

State
MA

Zip Code
02141-

Purpose of Disbursement
POLITICAL CONSULTING / ADVICE NON-FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60720.E8827

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

POLITICAL CONSULTING / AD-
VICE NON-FEA

SUBTOTAL of Disbursements This Page (optional)

5343.36

TOTAL This Period (last page this line number only)

173957.51

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
SHEA. TRANSFER OF EXCESS FUNDS FROM FED

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8802

Date of Disbursement

M M / D D / Y Y Y Y
07 18 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
DALTON TRANSFER EXCESS CONTRIBUTION FRO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8843

Date of Disbursement

M M / D D / Y Y Y Y
07 31 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
T. ROBERTS TRANSFER OF EXCESS FUNDS FROM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60713.E8744

Date of Disbursement

M M / D D / Y Y Y Y
07 11 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
CHRIS/HERB COLLINS TRANSFER OF EXCESS FE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8841

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
C. EGAN/ G. LISCIOTTI TRANSFER OF EXCES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60713.E8743

Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

20000.00

TOTAL This Period (last page this line number only)

35000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8745

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1022.44

PAYROLL

Full Name (Last, First, Middle Initial)

B. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8847

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1022.44

PAYROLL

Full Name (Last, First, Middle Initial)

C. Paul Craney

Mailing Address 177 Cambridge Ave

City
Fair Haven

State
NJ

Zip Code
07704-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8746

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1080.10

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3124.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paul Craney

Mailing Address 177 Cambridge Ave

City
Fair Haven

State
NJ

Zip Code
07704-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8848

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1080.10

PAYROLL

Full Name (Last, First, Middle Initial)

B. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8747

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1120.65

PAYROLL

Full Name (Last, First, Middle Initial)

C. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8849

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2020.75

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4221.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Bruce Harrison

Mailing Address 101 Elm St

City Wakefield State MA Zip Code 01880-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8791

Date of Disbursement

M M / D D / Y Y Y Y
07 / 10 / 2006

Amount of Each Disbursement this Period

1000.00

PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE

Full Name (Last, First, Middle Initial)

B. Lyndsay Jones

Mailing Address 95 West Squantum St. #707

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8748

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2006

Amount of Each Disbursement this Period

969.61

PAYROLL

Full Name (Last, First, Middle Initial)

C. Lyndsay Jones

Mailing Address 95 West Squantum St. #707

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8850

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2006

Amount of Each Disbursement this Period

969.61

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2939.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Barney Keller

Mailing Address 187 Lewis Rd.

City
Belmont

State
MA

Zip Code
02478-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8749

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL

Full Name (Last, First, Middle Initial)

B. Barney Keller

Mailing Address 187 Lewis Rd.

City
Belmont

State
MA

Zip Code
02478-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8851

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL

Full Name (Last, First, Middle Initial)

C. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8750

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2149.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

891.73

PAYROLL

Full Name (Last, First, Middle Initial)

B. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City
Quincy

State
MA

Zip Code
02169-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1323.34

PAYROLL

Full Name (Last, First, Middle Initial)

C. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City
Quincy

State
MA

Zip Code
02169-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8853

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1319.26

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3534.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ruth Rice

Mailing Address 44 Church St.

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8752

Date of Disbursement

/ /

Amount of Each Disbursement this Period

912.81

PAYROLL

Full Name (Last, First, Middle Initial)

B. Ruth Rice

Mailing Address 44 Church St.

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

912.81

PAYROLL

Full Name (Last, First, Middle Initial)

C. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City
Waltham

State
MA

Zip Code
02453-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8753

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2735.46

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4561.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City
Waltham

State
MA

Zip Code
02453-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8855

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2006

Amount of Each Disbursement this Period

2735.46

PAYROLL

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60719.E8754

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2006

Amount of Each Disbursement this Period

1206.39

PAYROLL

Full Name (Last, First, Middle Initial)

C. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8856

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2006

Amount of Each Disbursement this Period

1483.50

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

5425.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City Boston State MA Zip Code 02132-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8755

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

1595.15

PAYROLL

Full Name (Last, First, Middle Initial)

B. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City Boston State MA Zip Code 02132-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8857

Date of Disbursement

07 / 25 / 2006

Amount of Each Disbursement this Period

1595.15

PAYROLL

Full Name (Last, First, Middle Initial)

C. Ensieh Sarrami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8756

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

967.03

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4157.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 / 74

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ensieh Sarrami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8858

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2006

Amount of Each Disbursement this Period

967.03

PAYROLL

Full Name (Last, First, Middle Initial)

B. Mary Rose Watson

Mailing Address 463 Park Dr. Apt 16

City Boston State MA Zip Code 02115-

Purpose of Disbursement
PAYROLL- ADMINISTRATIVE SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60817.E8869

Date of Disbursement

M M / D D / Y Y Y Y
07 / 20 / 2006

Amount of Each Disbursement this Period

1500.00

PAYROLL- ADMINISTRATIVE
SERVICES

Full Name (Last, First, Middle Initial)

C. Robert Willington

Mailing Address 12 Arlington Street

City Reading State MA Zip Code 01867-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60719.E8757

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2006

Amount of Each Disbursement this Period

1231.44

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3698.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 / 74

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60817.E8859

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1231.44

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1231.44

TOTAL This Period (last page this line number only)

35042.83

Image# 26930342847

Form/Schedule: **F3XN**

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Transaction ID: **C00042622**

NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY IS REQUIRED TO BE REPORTED ON SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided.
